

# BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	CLASS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	2/2/01
FORMALITY REVIEW	TH	953	05-11-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

☒ Rejected      N \_\_\_\_\_ Non-elected  
☐ Allowed      I \_\_\_\_\_ Interference  
☐ (Through numeral) Canceled      A \_\_\_\_\_ Appeal  
☐ Restricted      O \_\_\_\_\_ Objected

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If more than 150 claims or 10 actions  
staple additional sheet here

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